File Code: OR.CEM

## MUNDARING & WOOROLOO CEMETERIES





Deceased's Details							
Surname:					Title:		
Given Names:							
Date of Death: / /							
Cemetery: Mundaring / Wooroloo Plot Location:							
Grantee Details and Authority for Monumental Works							
Surname:					Title:		
Given Names:							
Address:							
					Post Code:		
Email:							
Contact Number: Alternate Contact:							
As Grantee I approve monumental works at the above plot							
Current Grant of Right: Signate	Signature:					Date: / /	
Monumental Company & Details							
Company:							
Current Shire of Mundaring Licence Number:				Application Fee: \$			
Contact Person: Contact I				act Num	Number:		
Email:							
Brief Description of Work: (Application not required for Remove and Reinstate)							
Please attach proposed works plan with details and dimensions. Plans and specifications to comply with AS 4204:2019							
Signature:						Date:	